Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>6/10/2010</u>	Address:	2400 Block Burton Lane
Case #:	<u>53-22060</u>		Martinsville, Indiana
County:	Morgan		
Type of Laboratory Seizure (check one) Operational Lab Chemical/Glassware/Equipment (only)		Seizure Location (o Residence Outbuilding	check all that apply) Hotel/Motel Open – No Structure
Dumpsi	te (only)	☐ Vehicle	Other:
(check all the Lithium Red Pho	/Ammonia Reaction(s): osphorous/Iodine Reaction(s):	r, etc)	
Flammable Solvents: open air			
Water Reactive Metal (Lithium): Open air			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid: open air			
Corrosive Base: open air			
Other (item and location):			
Yes No	r age 18 discovered (check one) (number present) port to Child Protective Services	Ephedrine	e <u>Information</u> e/Pseudoephedrine Tracking Log erchant Tip
This report	is to be faxed to the following agen	cies that serve the lo	cation:
Fire Departr	ment: Martinsville Fire	Fax: <u>765-34</u>	<u>42-2343</u>
Health Depa	artment: Morgan Co. Health	Fax: <u>(765)</u>	<u>342-1062</u>
Child Protec	etion Service:	Fax:	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: T. Egler Phone 317-234-4591			

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.